

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Number::	TBA
Application Date::	07/08/03
Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	LOW TEMPERATURE JOINING OF PHOSPHATE GLASS
Attorney Docket Number::	SGT 32 C1
Total Drawing Sheets::	6

### INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	USA
Status::	FULL CAPACITY
Given Name::	Samuel
Middle Name::	David
Family Name::	CONZONE
City of Residence::	Clarks Summit
State or Province of Residence::	PA
Country of Residence::	USA
Street of Mailing Address::	1606 Applewood Avenue
City of Mailing Address::	Clarks Summit
State or Province of Mailing Address::	PA
Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	14811

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: USA  
Status:: FULL CAPACITY  
Given Name:: Joseph  
Middle Name:: S.  
Family Name:: HAYDEN  
City of Residence:: Clarks Summit  
State or Province of Residence:: PA  
Country of Residence:: USA  
Street of Mailing Address:: 107 Fox Run Circle  
City of Mailing Address:: Clarks Summit  
State or Province of Mailing Address:: PA  
Country of Mailing Address:: USA  
Postal or Zip Code of Mailing Address:: 18411

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: USA  
Status:: FULL CAPACITY  
Given Name:: Alexander  
Middle Name:: J.  
Family Name:: MARKER,III  
City of Residence:: Moscow  
State or Province of Residence:: PA  
Country of Residence:: USA  
Street of Mailing Address:: Box 7176 RR 7  
City of Mailing Address:: Springbrook Twp  
State or Province of Mailing Address:: PA  
Country of Mailing Address:: USA  
Postal or Zip Code of Mailing Address:: 18444

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 23599

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 23599

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/430,885	11/01/99

#### ASSIGNMENT INFORMATION

Assignee Name:: SCHOTT GLASS TECHNOLOGIES, INC.  
Street of Mailing Address:: 400 York Avenue  
City of Mailing Address:: Duryea  
State or Province of Mailing Address:: Pennsylvania  
Postal or Zip Code of Mailing Address:: 18642